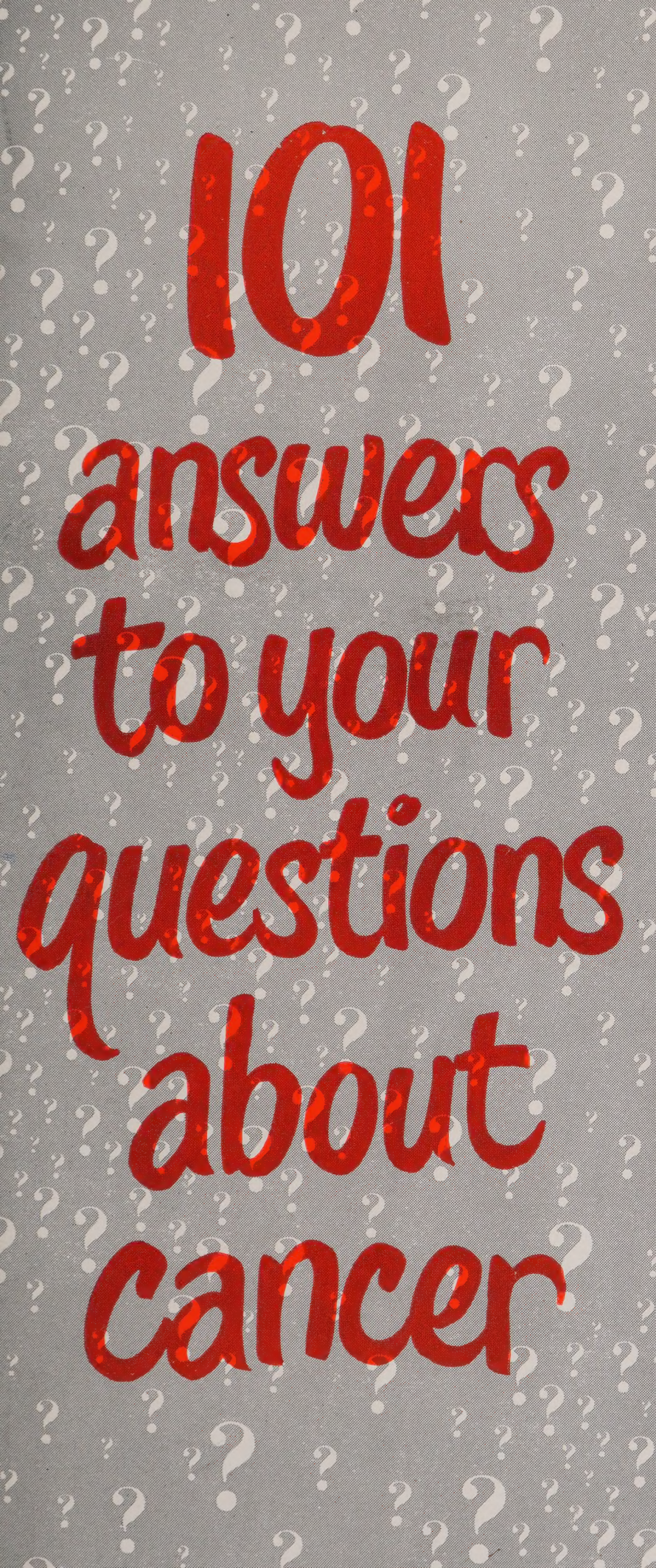




101 answers to your questions about cancer

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These 101 questions have been selected by physicians engaged in health education as those most frequently asked by the layman about cancer. The answers are necessarily brief. For further information, consult your family physician or your state or local office of the American Cancer Society.

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AMERICAN CANCER SOCIETY



1. What it is

1. What is cancer?

Cancer is a disorderly growth of cells of the body's tissues. It is not governed by the laws which control the growth of normal cells. If it is not destroyed or removed, it never ceases to grow and eventually causes death.

2. What is the difference between normal and cancerous growth?

Normal growth begins when the fertilized egg or ovum divides into two cells and it continues, under the control of natural body forces, until maturity is reached. Thereafter growth takes place only to replace injured or worn-out tissue.

Cancer arises when a cell or group of cells begins to grow in a wild, disorderly manner. The cells of this disorderly growth do not respond to the controls which keep normal cells in check. They force their way among the normal cells in the vicinity, and later spread to other parts of the body. This uncontrolled cell growth is cancer.

3. Is cancer contagious or infectious?

As cancer is not due to a germ, it is neither contagious nor infectious. There is no record in medical literature of physicians or nurses having gotten cancer from their patients despite the most intimate contact with them. A person can no more "catch" cancer from another than he can "catch" the color of his eyes.

4. Is cancer a blood disease?

No. The only part blood plays in cancer is that of a mechanical carrier of the cancer cells from one part to another of the patient's body. However, cancer may develop in certain tissues which form the cells of the blood.

5. How does cancer spread through the body?

In three ways. (1) Cancer cells grow through the walls of blood vessels and are carried by the blood stream to distant parts of the body. (2) They enter

the lymphatic stream in a similar manner and are carried to nearby lymph glands. (3) The cancer cells grow directly from one tissue into another.

6. *How fast does cancer grow?*

There is no definite rate of growth of cancer tissue. Some types will grow more in a few weeks than other types will in several years.

7. *Is cancer a single disease?*

No. The term "cancer" includes all forms of malignant growth. Very many varieties are known. These have certain characteristics in common, such as uncontrolled growth, tendency to spread widely in the body, and fatal termination if not treated early and adequately. They differ in certain characteristics, such as location in the body, microscopic appearance, and response to treatment. Their histories of development may be quite dissimilar and it is probable that the conditions which may precede them also differ greatly.

8. *Are all tumors cancerous?*

No. Tumors are of two kinds — benign (usually harmless) and malignant or cancer.

9. *What is the difference between a benign and a malignant growth?*

Benign growths usually have a limiting membrane and push aside the cells of the tissue in which they are found. They never spread to other parts of the body. *Malignant* cells grow between normal cells, infiltrating the tissues by means of root-like extensions. Unless adequately treated, cancer cells "colonize" (metastasize) to other parts of the body.

10. *How can we tell if a growth is cancer?*

By pathological examination of a small portion of the suspected tissue under the microscope. In advanced cases, physical examination alone of the patient may give the diagnosis. However, when this is possible the growth is often too far advanced to offer much hope of a cure.

11. *What is the difference between sarcoma and carcinoma?*

The difference is chiefly one of appearance under the microscope and the locations where they grow.

Sarcomas are found in connective tissue, carcinomas in epithelial or lining tissue. Both are cancer. Sarcoma is seen more often in younger age groups.

12. *Are cancer and leprosy related?*

No. Leprosy is a chronic, infectious, contagious disease caused by a germ. While cancer is a chronic disease, it is not infectious nor contagious and its cause is obscure.

13. *Can lower animals develop cancer?*

Yes. Cancer may be found in all forms of life, both plant and animal.

2. What causes it

14. *What causes cancer?*

The essential cause is unknown. Many factors are involved, but the most common is some form of chronic or prolonged irritation. This irritation may be of several kinds, as chemical, thermal (heat), or mechanical, as friction.

15. *Is cancer caused by a germ?*

There is no definite scientific evidence that cancer in humans is caused by a germ.

16. *Does cancer come from a single bruise?*

A type of bone cancer may rarely result from a single severe injury. It is believed that a single injury to soft tissue, such as the breast, will not cause cancer to develop.

17. *What is the relation of food to cancer?*

In certain individuals, Vitamin B deficiency may result in changes in certain tissues, particularly of the mouth and lips, which may ultimately become cancerous. In general, however, so far as is known, no food or combination of foods has any influence on the cause or cure of cancer.

18. *Will irregularity in eating cause cancer of the stomach?*

There is no scientific evidence that it will, since

cancer of the stomach occurs in people who eat regularly the most healthful foods.

19. Does eating hot foods cause cancer?

There is little evidence that the temperature of food is an important factor in the development of cancer.

20. Does the use of alcohol bear any relation to cancer of the stomach?

Not so far as is known. Alcohol may have an unfavorable effect on stomach tissues of some persons, but no more so than other substances taken into the stomach with food or drink.

21. Is cancer hereditary in human beings?

There are probably inherited tendencies to form cancer of different types. Since, however, the method of inheriting such tendencies is obscure and undoubtedly complex, the presence of cancer in one or both parents should be merely a cause of greater alertness in looking for and recognizing suspicious conditions on the part of the individual. There is no need of fear or of a fatalistic attitude. The facts do not justify them.

22. Can cancer be transmitted by kissing or casual contact between persons or between persons and animals?

No. There is no authentic record of cancer having been transmitted by kissing or by any contact, accidental or otherwise, either between persons or between persons and animals.

23. Do corns ever become cancerous?

Cancer may occur in any tissue of the body, but since a corn consists entirely of non-vital cells it could not in itself develop cancer.

24. Do freckles ever turn into cancer?

Simple freckles do not. However, flat moles containing certain pigment of a bluish-black color and looking like dark freckles, may become cancers and should be checked periodically.

25. Do hemorrhoids turn into cancer?

No. Hemorrhoids are enlarged veins in the rectal wall. Cancer is occasionally found in the tissue

above the hemorrhoids, so "bleeding piles" should be examined carefully to determine whether cancer is present.

26. *Can one's mental condition influence the course of cancer?*

Not so far as is known. Cancer is a disease of body cells. One's mental condition has no effect on the course of the disease since this malignant change is apparently due to physical rather than mental processes.

3. Defense measures

27. *How can one guard against cancer?*

By preventing, so far as possible, prolonged irritation to any part of the body. Specifically, protection from overexposure to the sun and wind, prompt repair of all birth injuries to the womb, permitting the breasts to function normally, repair of jagged teeth, avoidance of ill-fitting dental plates, self-control in using tobacco, correction of chronic constipation — in short, elimination of unnecessary abuse of any tissue is a common sense method of helping to guard against cancer.

28. *What is meant by a "precancerous lesion"?*

Any abnormal condition that, if permitted to continue, may develop into cancer.

29. *What are some of the more important precancerous lesions?*

White spot disease on mucous membranes, especially of the mouth; dry, scaly, itching patches on the skin, particularly the face; sores caused by jagged teeth and ill-fitting dental plates; dark colored moles subject to irritation; unrepaired injuries due to childbirth. These should all be investigated by a physician.

30. *What precautions should be taken to avoid cancer of the mouth?*

Keep the mouth clean. Have jagged teeth repaired or removed. Do not use an ill-fitting dental plate which causes a sore on the gums. If white spots appear in the mouth or on the tongue, stop the use of tobacco and see a doctor.

31. *What precautions should be taken to avoid cancer of the skin?*

Dark colored moles and warts, if subject to irritation, should be removed. Itching, scaly patches on the skin should be treated before they become open sores. Fair-skinned people, especially, should avoid continuous overexposure to direct sun rays. Recurrent fever blisters on the lip should be carefully examined. Keep the skin clean.

32. *Should all moles be removed?*

No. A flat colorless mole is probably as harmless as a freckle. Bluish-black hairless moles, especially when subject to irritation, should be removed. Any mole or wart showing change in size or color should be promptly and completely removed and the removed tissue examined by a pathologist to determine if cancer is present.

33. *Can immunity to cancer be acquired as with diphtheria or typhoid fever?*

Production of immunity is possible only in diseases caused by germs. As cancer is not in this class, immunity cannot be developed against it.

34. *Why do many people wait before consulting a physician when cancer may be present or suspected?*

Primarily because of fear or ignorance of the signs of cancer and of the vital importance of securing treatment early. Some people also think there is a social disgrace in having cancer and so hide the fact from their physicians and often from friends and relatives. This is not a justifiable attitude.

35. *Can a tuberculous person ever have cancer?*

He can. The presence of tuberculosis or any other disease gives no assurance that cancer may not also develop.

36. *Why don't the white corpuscles in the blood kill cancer cells?*

The chief function of white blood corpuscles is to protect the body against bacteria or germs. They kill germs and combat infection. They have no effect on cancer cells.

37. *How can we control cancer?*

First, by a prompt visit to a physician when suspicious signs or symptoms appear. Intelligent alertness by the individual may well save his life.

Second, by having complete, annual physical examinations. Women over 35 should be examined twice a year.

Third, by the physician's "high index of suspicion" of cancer in all patients.

Fourth, by diagnosis at the earliest possible moment, followed by adequate treatment.

Fifth, by a widespread knowledge, both lay and professional, of the character of cancer, its causes, methods of spreading, the value of early diagnosis and adequate treatment, and means of protection.

Support of such organizations as the American Cancer Society is essential.

4. How to detect it

38. *How can you tell if you have cancer without seeing a doctor?*

You cannot. A regular thorough physical checkup by your family physician is your best guard against cancer, plus an examination when one of the seven danger signals or warnings appears. *You* are the first line of defense against cancer because you, and you alone, can recognize a danger signal and heed its warning.

39. *What are some of the early signs of cancer?*

There are seven common ones. They are often called the Seven Danger Signals of Cancer.

1. Any sore that does not heal.
2. A lump or thickening in the breast or elsewhere.
3. Unusual bleeding or discharge.
4. Any change in a wart or mole.
5. Persistent indigestion or difficulty in swallowing.
6. Persistent hoarseness or cough.
7. Any change in normal bowel habits.

You should go at once to a doctor upon the appearance of any one of them. Memorize this list.

40. Is pain an early symptom of cancer?

No, except in a cancer of bone or nerve tissue. Pain usually is a late symptom and when it comes the growth is often far advanced.

41. Why should cancer be diagnosed and treated early?

The sooner it is found the less likely it is to have spread to other parts of the body where successful removal is impossible.

42. How long is it safe to wait after suspicious symptoms appear before consulting a physician?

Any delay is dangerous. Go at once to a doctor and ask for a thorough examination.

43. Why are periodic examinations necessary?

The earlier a cancer is treated the greater the chance of a cure. Through periodic examinations cancer may be detected in its early stages, before the individual has noticed any sign or symptom in himself.

44. What should comprise a thorough physical examination?

Careful inspection of the entire body surface. Heart, blood vessel and lung examination. Examination by sight and touch of accessible organs, such as the mouth, nostrils, ears, throat, chest, breasts, womb, and rectum. Examination of stomach and intestines by X-ray when indicated. Microscopic examination of blood, urine, and any suspected tissue. In women, special examination of the breasts. Other examinations as indicated, as

of the eye, bladder and prostate by appropriate methods.

45. Is bleeding always a sign of cancer?

No, but bleeding should be promptly and carefully investigated to determine if it is due to cancer. A small percentage of bleeding nipples are due to cancer. Bleeding from other body openings, as rectum or bladder, should be carefully investigated to rule out cancer. Unnatural vaginal bleeding, especially after the change of life, is always suspicious.

46. Does blood in bowel movements indicate cancer?

Movements streaked with bright blood or the occurrence of black or "tarry" stools should have prompt and thorough investigation. The assumption that rectal bleeding is merely due to hemorrhoids, or piles, is most dangerous since such bleeding may be due to a multiplicity of causes, including cancer, which require prompt treatment.

47. Does blood in the urine indicate cancer?

It may, but it may also be caused by conditions other than cancer. A careful examination is essential to rule it out.

48. Is it true that cancer generally develops among people in poor health?

There is no known relation between the status of one's health and the development of cancer. Regular checkups by your physician *at your request* provide the best safeguard against cancer as well as against other types of disease.

49. How can we diagnose cancer of the stomach?

The best method is X-ray. The outline of the interior of the stomach when filled with a dense substance, as barium sulphate, will often give clues to the presence of cancer. Certain chemical tests of stomach contents are sometimes of value. In late stages a lump may often be felt through the body wall.

**50. *Are all hospitals equipped to
diagnose and treat all kinds of cancer?***

No. To be adequately equipped for this purpose a hospital must have an operating room; a laboratory for the microscopic diagnosis of tissue; X-ray equipment suitable for diagnosis and for treatment; and must own or have access to a sufficient quantity of radium. To make this equipment effective there must be physicians adequately trained in its use.

**51. *Is cancer more frequent among negroes
than among whites?***

Proportionately fewer cancer deaths are reported among negroes than among whites, but this perhaps is due to poor reporting of the disease.

5. How to treat it

52. *How should cancer be treated?*

By surgery, X-ray, or radium, or a combination of the three in the earliest possible stage of the disease.

**53. *Are X-ray treatments good for all
kinds of cancer?***

No. Treatment depends on type and location of the growth. Some cancers will not respond to X-ray or radium treatment but must be treated by surgery or other means, as certain hormones or isotopes.

**54. *What is the difference in the action of
X-rays and radium on cancer tissue?***

There is no essential difference. When properly used both will destroy cancer cells without seriously injuring the normal cells with which they come in contact.

55. *How is radium used?*

Radium in hollow needles is inserted into the cancerous growth or in the tissue surrounding it, or both, and removed after treatment is concluded.

Radium in a suitable container may be placed in contact with the growth, as in cancer of the skin. In larger quantities it may be used at a distance from the body, the rays passing through an opening in the container into the cancerous growth. The emanating gas of radium, known as radon, in suitable containers may be used in the same manner as the radium salt from which it is obtained.

56. *Why is radium so expensive to use?*

No less than 5.9 tons of a mineral which is half uranium must be processed to extract a single gram of radium. To extract a pound, 2,680 tons of such a mineral would be required. As minerals containing radium are not often this rich, in actual practice a yield of 1 gram of radium in 10 tons of ore is considered very good, and even minerals which yield only 1 gram in 200 tons are processed. It is, therefore, not surprising that the price of radium is about \$20,000 per gram.

57. *Do surgical or radiation treatments spread cancer?*

No. On the contrary, such treatments tend to limit the spread of cancer.

58. *Can the spread of cancer be stopped or retarded temporarily?*

At times it can. Certain cancerous growths, hopeless from the standpoint of cure, may be controlled temporarily by proper treatment. Sooner or later, however, these growths may fail to respond to further treatment.

59. *What should a person do who thinks he may have cancer?*

Go to his physician *at once* for a thorough physical examination.

60. *Is cancer curable only in the early stages?*

Yes, in the large majority of cases. At times, however, cures have been obtained after the cancers have been present for a long time. The type of cancer always has an important bearing on its curability.

61. *How long will an untreated cancer patient live?*

This will differ with each individual and with the location and type of cancer.

**62. *Is it ever possible to state that a cancer has been completely cured?
If so, how much time must pass before the "cure" is recognized?***

After a cancer patient has been treated and has remained free of recurrence of disease for a period of five years, the chances for reappearance of the tumor are extremely small. (In a few rare instances cancer has recurred eight, ten or twenty years later, so that a semiannual physical examination is a *must* for these patients.)

**63. *If you have been cured of cancer, can you develop another cancer?
In the same place?
In some other part of the body?***

Yes. Regardless of a patient's past medical history, including the treatment of a previous cancer, he should be examined at regular intervals. Because of the tendency for cancer to reappear at the place of a previously existing growth or nearby, a patient should have a regular follow-up at least every six months. A new cancer may appear at the same place or in another part of the body.

64. *Is there any known serum cure for cancer?*

No. A serum is of value only against a disease due to a germ. Cancer is not caused by a germ; therefore, serums are of no value in its treatment.

65. *Is it ever safe to rely on salves or medicine to "cure" cancer?*

No. No paste nor salve will penetrate the tissues far enough to destroy deep-seated cancer cells; neither is there any medicine that will destroy cancer cells without also injuring normal cells with which it comes in contact.

66. *Is there any chemical that destroys cancerous tissue?*

There is some evidence that a few chemical substances such as the nitrogen mustards (chemicals related to the poisonous mustard gas) partially

destroy cancerous tissues in some forms of cancer and leukemia. These chemicals are not cures but may alleviate suffering and may prolong life.

67. *Will ultra-violet or infra-red rays kill cancer cells?*

No. These agents have no curative effect on cancer cells even at high intensity over long periods of time.

68. *Will hormones cure cancer?*

This problem is still under investigation. There is a great deal of evidence to indicate that treatment by certain hormones may prolong life, and alleviate pain and suffering in certain breast cancers in the female and prostate cancers in the male. It is too early to state whether these hormones will cure cancer.

69. *Will isotopes cure cancer?*

So far, isotopes have proved of limited value in the treatment of cancer. However, a small percentage of thyroid cancers respond remarkably well to radioactive iodine and certain cancers of the blood and blood-forming organs are quite favorably affected by radioactive phosphorous.

70. *Are the results of cancer studies on animals applicable to human beings?*

Experiments with animals are essential to test many theories concerning cancer. The nature of cancer in animals and man is so similar that principles discovered in one will undoubtedly prove to be of value in understanding the problem in the other. However, animal experiments always require careful checking to prove their relevance to cancer in human beings.

71. *What is the latest and most successful of the recently reported cancer treatments?*

While many "cures" are constantly being evaluated by many laboratories over the country, surgery, X-ray treatments, and radium remain the chief weapons of the physicians' fight to cure cancer. Certain hormones and isotopes offer some promise of assistance in their fight but it is much too early to call these in any form "cures."

72. *Is any real progress being made in cancer research? Along what lines?*

Real progress is being made in cancer research which has thrown much new light on the normal and abnormal growth processes. However, the goal of finding the cause of cancer and thus its prevention is still in the future. Avenues of investigation have recently opened up on all sides: in *chemistry* by a study of the hormones and the complex role they play; in *physics* by application of radioactive materials and the development of X-rays at higher voltages; in *surgery* by more radical excision of tumors; and in the studies of enzymes, genetics, nutrition, cytochemistry, etc. Scientific disciplines of all types have been brought to the front in an all-out attack.

6. Cancer in men

73. *Are cancers in men and women different?*

There are no fundamental differences in cancers appearing in men and women.

74. *What forms of cancer are more common among men than women?*

Cancer of the buccal cavity, pharynx, esophagus, stomach, rectum, larynx, bronchus, lung, kidney, bladder, skin, and brain are all more common in men than in women. Men alone, of course, have cancer of the prostate and male genital organs.

75. *Does smoking cause cancer?*

The relation of smoking to cancer of the mouth and lungs is uncertain. Therefore, it is best to play it safe and, if you smoke, to use tobacco in moderation.

76. *Can cancer result from sexual intercourse?*

No. There is no known relation between cancer and sexual activity on the part of the male or female.

77. *Is cancer of the prostate common?*

At what age does it generally occur?

Yes, cancer of the prostate is one of the most common forms of cancer in older men. Men should be on guard against this form of cancer especially as they approach 60. A thorough physical examination, *including a rectal examination*, is the only way to discover this hidden cancer early enough for cure.

7. Cancer in women

78. *Do more women than men die of cancer?*

Almost as many men die of cancer every year as women. In the United States, 88,801 men as compared with 93,204 women died of cancer in 1946. Three factors combine to account for this difference: (1) there are a few more women than men in the population; (2) the female population is somewhat older on the average than the male population; and (3) the incidence of cancer is higher among females than males due primarily to the high incidence of cancer of the breast and female generative organs.

79. *Does cancer occur more frequently among married or unmarried women?*

Reports from death certificates show that above the age of 40, the cancer death rate is higher among single women than among married women of the same ages. Single women have higher death rates from cancer of the breast and married women have more cancer of the uterus. Many physicians believe that nursing a child reduces the chances of cancer of the breast and that injury at childbirth increases the risk of cancer of the uterus if proper medical attention is not received.

80. *Is there danger in watching a lump in the breast to "see what happens"?*

Yes, a very grave danger. Time is the most important factor in the control of cancer and waiting to

“see what happens” may permit a curable cancer to become incurable by spreading to other tissues.

81. *Are all breast lumps cancerous?*

Not more than a small percentage are cancer. Only by a careful pathological examination of the removed lump can it be definitely determined if it is cancer.

82. *What precautions should be taken to avoid cancer of the breast?*

Do not wear garments that press the breast tissue tightly against the chest wall. Every woman should have her breasts examined semi-annually by a physician. She should request her physician to instruct her in the proper technique for examining her own breasts in the erect and reclining positions and should examine her breasts once a month shortly after her period.

83. *What precautions should be taken to avoid cancer of the uterus (womb)?*

Have all birth injuries repaired within six months after they occur. Have all unnatural vaginal discharges investigated. Up to the age of thirty-five have an annual examination; thereafter a semi-annual one. Bleeding after the change of life calls for a physician's examination at once.

84. *Do uterine fibroids ever become cancerous?*

Fibroid tumors only rarely undergo malignant change.

8. Cancer in children

85. *Can cancer develop in children? At what age?*

No age is free from cancer. Certain forms of cancer are most often found in young children.

86. *If a parent dies of cancer are the children more likely to have the disease?*

Practically, no. In many families where a parent has had cancer, the disease has not appeared in

the children. Again, a person in whose family there is no record of cancer may develop it.

87. *Once it has gotten a start, does cancer develop more quickly in children than in older people?*

Probably not. The rate of growth at any age depends upon the type of cancer.

88. *If detected in time, can cancer in a child be cured more quickly than in an adult?*

The cure of cancer has little relation to age. It depends upon the extent of its growth at the time it is detected, and the adequacy of the treatment as well as the type of cancer.

9. Cancer's vital statistics

89. *Is cancer increasing?*

The number of annual cancer deaths in the United States has increased from 41,000 in 1900 to 189,811 in 1947. The major reason is the growing number of older people in the population coupled with the fact that the cancer death rate (the number of deaths per 100,000 of the population) rises very rapidly with age. Improved diagnosis and better reporting of deaths are other factors that help explain the increase. The cancer death rate has increased from 64 per 100,000 in 1900 to 132.4 per 100,000 in 1947, partly due to the aging of the population. Cancer death rates within specific age groups in men have tended to rise but in recent years some of the rates for females within certain age groups have decreased.

90. *How does cancer compare with other diseases as a cause of death?*

It occupies second place, as seen from the follow-

ing table of deaths from leading causes in the United States in 1947:

Heart Disease	460,580
Cancer	189,811
Cerebral Hemorrhage	131,039
Nephritis	80,288
Pneumonia and Influenza.....	61,836
Tuberculosis	48,064

91. At what age do cancer deaths occur most frequently?

The age distribution of cancer deaths in the United States in 1946 is shown herewith:

<i>Age</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Under 5	353	294	647
5-14	391	326	717
15-24	749	536	1,285
25-34	1,373	2,381	3,754
35-44	3,775	7,988	11,763
45-54	11,993	16,463	28,456
55-64	23,128	22,466	45,594
65-74	27,026	23,894	50,920
75 & over	20,013	18,856	38,869
	88,801	93,204	182,005

92. How can cancer deaths be reduced?

By four means: (1) early diagnosis, the responsibility of the patient in having himself regularly checked by his physician and the responsibility of the physician in recognizing the possibility of cancer and prompt referral for further diagnostic procedures and proper treatment; (2) adequate and prompt treatment, the responsibility of the physician who treats his patient for cancer; (3) discoveries of newer and more effective means of treatment; and (4) the ultimate discovery of the cause of cancer. These last two must come from the research laboratories and the clinical investigator.

From these stem the basic principles of the cancer control program of education, research, and service of the American Cancer Society, the health agencies of the federal and state governments and private philanthropies.

10. Cancer and you

93. *Is there any disgrace in having cancer?*

No. There is no more disgrace in having cancer than in having a broken arm.

94. *How can I go about locating the cancer detection center nearest my home?*

By inquiring from your family physician, the local unit of the American Cancer Society, or from your city or county health department.

95. *Where can I get the names of specialists qualified to treat particular kinds of cancer?*

Your family doctor may refer you to a cancer clinic at your local hospital or to a specific physician with the best experience in treating your type of case. The local unit of the American Cancer Society will be glad to be of service.

96. *Can I get proper cancer treatment in my small local hospital or must I go to a large city?*

This depends entirely upon the type of cancer you have, the adequacy of facilities for treatment in your area, and the experience of the physicians there. Each patient is a separate problem and must be treated individually.

97. *How can I find the nearest hospital equipped to diagnose and treat cancer?*

Your family doctor, your local unit of the American Cancer Society, your county medical society, or your county or city health department will be glad to refer you.

98. *Can a physician examine a patient thoroughly for cancer in his office or is it necessary to go to a hospital?*

An office examination should be sufficient unless, by questioning or from his findings in his office, your doctor feels you should go to the hospital for a more complete examination, such as by X-ray and blood tests.

99. Does cancer usually cost more to cure than other major diseases?

It often does. Here, again, it depends upon the type of cancer you have and how much must be done to treat it.

100. Why are quacks dangerous?

For the following reasons, among others:

1. Few quacks are medically trained; therefore, they have no fundamental knowledge about cancer.
2. They cause the patient to lose valuable time that should be used in getting proper treatment.
3. The pastes and "medicines" used by quacks have no value in curing cancer.
4. The quack takes the patient's money under false pretenses thus depriving him of means for obtaining competent treatment elsewhere.

101. How can I tell a quack from a reputable physician?

If a person advertises a cure, guarantees a cure, or employs a method of diagnosis or treatment not generally accepted or endorsed by the medical profession, he may be classed as a quack. No reputable, ethical physician will do any of these things.

The best defense against cancer

The best defense against cancer lies in everyone having periodic *thorough* physical examinations. Women over 35 should be examined twice a year. Other people should be examined at least once a year. In addition, for protection *between* examinations, everyone should know the 7 Danger Signals which may mean cancer and go at once to a doctor upon the first appearance of any one of them.

The 7 Danger Signals of cancer are:

1.

Any sore that does not heal.

2.

A lump or thickening, in the breast or elsewhere.

3.

Unusual bleeding or discharge.

4.

Any change in a wart or mole.

5.

Persistent indigestion or difficulty in swallowing.

6.

Persistent hoarseness or cough.

7.

Any change in normal bowel habits.

For further information consult your doctor, your city or county health department, or your local or state office of the American Cancer Society.

AMERICAN CANCER SOCIETY

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Support the work of the American Cancer Society in Minnesota by . . .

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